FORM D

UNITED STATES
RECEIVED SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

JUN 0 5 2002

FORM D

hours

OMB APPROVAL
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SEC US	E ONLY
Prefix	Serial
DATE REC	EIVED

	PURSUANT TO REGULATION D,
02039920	SECTION 4(6), AND/OR
	UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indi GEDR Holding Corp.	cate change.) //65570
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 50	06 Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DAT	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicat GEDR Holding Corp.	e change.)
Address of Executive Offices 1 Greenwich Office Park (Number and Street, City, State, Zip Code) Greenwich, Connecticut 06831	Telephone Number (Including Area Code) (203) 422-8200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Not Applicable	Telephone Number (Including Area Code) Not Applicable
Brief Description of Business Holding company	PROCESSE
Type of Business Organization Corporation Unimited partnership, already formed limited partnership, to be formed	other (please specify): JUN 2 0 2002
	Year THOMSON FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abb CN for Canada: FN for other foreign iu	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;

Each executive officeEach general and man		•	corporate general and ma	anaging partners	s of partnership issuers; and
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☑ Executive Officer	□ Director	General and/or Managing Partner
Full name (Last name first, it Jennings, Mark. E.	f individual)				
Business or Residence Addre 1 Greenwich Office Pa			Code) nnecticut 06831		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full name (Last name first, it Pflieger, Robert M.	f individual)		Control of the Contro		
Business or Residence Addre 1 Greenwich Office Pa			Code) nnecticut 06831		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full name (Last name first, is Campbell, Peter	f individual)				
Business or Residence Addre 1 Greenwich Office Pa			Code) onnecticut 06831		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full name (Last name first, i	f individual)		· ·	<u> </u>	
Business or Residence Addre 1 Greenwich Office Pa			Code) onnecticut 06831		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full name (Last name first, i Generation Capital Pa					
Business or Residence Addre 1 Greenwich Office Pa			Code) onnecticut 06831		
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full name (Last name first, i Generation Members'					
Business or Residence Addre 1 Greenwich Office Pa			Code) onnecticut 06831		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full name (Last name first, i GE Capital Information		Solutions Inc.			
Business or Residence Addre One Riverfront Place	ess (Number and	d Street, City, State, Zip Newport, Kent			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or
					Managing Partner
Full name (Last name first, i Miano, Robert J.	f individual)				
Business or Residence Address 313 Mills Place	ess (Number and	Street, City, State, Zip (Wyckoff, New	,		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full name (Last name first, i Krupp, Stanley	f individual)				
Business or Residence Address 12 King Street South	ess (Number and		Code) itario, Canada LOL 1L0)	

					B. IN	FORMAT	ION ABO	UT OFFE	RING				
1.	Has the	issuer sold	, or does t	the issuer in	ntend to se	ll, to non-a	ccredited	investors ir	n this offeri	ng?		Yes 	No
				. Ans	swer also i	n Appendi	x, Column	2, if filing	under ULC	DE.			
2.	What is	the minim	um invest	ment that w	vill be acco	epted from	any indivi	dual?	•••••			\$ 1	N/A
3.	Does the	offering p	ermit joir	nt ownershi	p of a sing	gle unit?	••••••		•••••			Yes 🔲	No
4.	commiss offering and/or v	sion or sir If a persyith a state	nilar rem son to be or states	uneration f listed is and list the na	for solicita n associate ame of the	ation of pu ed person of e broker or	irchasers i or agent o dealer. I	n connecti f a broker f more tha	on with sa or dealer r	les of secu egistered v persons to	directly, an writies in the orith the SEO be listed ar r only.	e C	
Fu	ll Name (Not Ap	Last name plicable	first, if in	ıdividual)	<u>.</u>								
Bu	siness or	Residence	Address	(Number a	and Street,	City, State	, Zip Code	e)					
Na	me of As	sociated B	roker or I	Dealer .		.,							
Sta	ites in W	nich Person	n Listed H	las Solicite	d or Inten	ds to Solici	t Purchase	rs					
(Check "A	All States"	or check i	ndividual S	States)	•••••						🔲 🛮 A	All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Fu	ll Name (Last name plicable	first, if ir	ndividual)			-,				****		
Bu	isiness or	Residence	Address	(Number a	and Street,	City, State	e, Zip Code	e)		_			
Na	ime of As	sociated B	roker or I	Dealer						10,0			
Sta	ates in W	hich Perso	n Listed H	las Solicite	d or Inten	ds to Solici	t Purchase	rs	· · · -		<u>-</u> -		
(Check "A	All States"	or check	individual S	States)				•••••			🔲 A	All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Fu	ll Name (Not Ap	Last name	first, if ir	ıdividual)						_			
Βι	isiness or	Residence	Address	(Number a	and Street,	City, State	e, Zip Code	e)		ı			
Na	ime of As	sociated B	Broker or l	Dealer									
Sta	ates in W	hich Perso	n Listed F	Has Solicite	d or Inten	ds to Solici	it Purchase	rs	···	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
(Check "A	All States"	or check	individual S	States)							🔲 A	All States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price		Amount Already Sold	
	Debt	\$	0.00	\$	0.00	
	Equity	\$	0.00	 \$	1,514,569.00	
	Common Preferred		-			
	Equity	\$	295,000.00	\$	13,000,000.00	
	☐ Common ☐ Preferred (Series A Preferred)		·			-
	Convertible Securities (including warrants) (Warrants for Common)	\$	0.00	\$	6,311.00	
	Partnership Interests	\$	0.00	<u> </u>	0.00	-
	Other (Specify)	\$	0.00	 \$	0.00	-
	Total	\$	295,000.00	 <u>-</u> -	14,520,880.00	-
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ		 Ψ	1,,520,000.00	-
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number		Aggregate Dollar Amount	
			Investors		of Purchases	
	Accredited Investors		6	 <u>\$</u> _	295,000.00	_
	Non-accredited Investors		0	\$_	0.00	_
	Total (for filings under Rule 504 only)		N/A	 \$	N/A	_
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		Type of		Dollar Amount	
	Type of offering		Security		Sold	
	Rule 505		N/A	 \$_	N/A	
	Regulation A		N/A	 \$_	N/A	
	Rule 504		N/A	 \$_	N/A	
	Total		N/A	\$	N/A	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$_	0.00	_
	Printing and Engraving Costs		_	\$_	0.00	_
	Legal Fees		_	\$	0.00	_
	Accounting Fees		_	\$	0.00	
	Engineering Fees			\$	0.00	
	Sales Commissions (specify finders' fees separately)		_	\$	0.00	
	Other Expenses (identify) <u>Transaction Fee and Expenses</u>		_	\$	0.00	
	Total		·	\$	0.00	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b: Enter the difference between the aggregate	offering price given in r	response to			<u> </u>	295,000.00
Part C –Question 1 and total expenses furnishe 4.a. This difference is the "adjusted gross proc	ed in response to Part C				4	273,000.00
5. Indicate below the amount of the adjusted graphic proposed to be used for each of the purpose purpose is not known, furnish an estimate an estimate. The total of the payments listed must to the issuer set forth in response to Part C - Qu	es shown. If the amou d check the box to the t equal the adjusted gros	nt for any left of the				
			D	nyments to Officers, irectors, & Affiliates		Payments To Others
Salaries and fees			<u>\$</u>	0.00	\$	0.00
Purchase of real estate			<u> </u>	0.00	\$	0.00
Purchase, rental or leasing and installation of mad	chinery and equipment		<u>\$</u>	0.00		0.00
Construction or leasing of plant buildings and fac	•••••	<u>\$</u>	0.00		0.00	
Acquisition of other businesses (including the value offering that may be used in exchange for the assets oursuant to a merger)	or securities of another	issuer	<u> </u>	0.00	_ 🗆 🖺	0.00
Repayment of indebtedness			<u>\$</u>	0.00	_ 🗆 🖺	0.00
Working capital			<u>\$</u>	0.00	🛛 💆	295,000.00
Other (specify):			<u>\$</u>	0.00		0.00
Column Totals			<u>\$</u>	0.00	_ 🛛 🖺	295,000.00
Total Payments Listed (column totals added)					295,000.00)
	D. FEDERAL	SIGNATI	URE			
The issuer has duly caused this notice to be sig following signature constitutes an undertaking by its staff, the information furnished by the issuer to	the issuer to furnish to	the U.S. Sec	urities and	Exchange Com	mission, upo	nder Rule 505, t n written request
Issuer (Print or Type)	Signature (1		Date		
GEDR Holding Corp.	100mg	luy		5/2	24/02	
Name of Signer (Print or Type)	Title of Signer (Print	or Type)				
Robert M. Pflieger	Vice President					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	
	Yes N 62 presently subject to any of the disqualification provisions of such	<u></u>
	See Appendix, Column 5, for state response.	
2. The undersigned Issuer hereby undertakes to CFR 239.500) at such times as required by state	furnish to any state administrator of any state in which this notice is filed, a notice on Forrate law.	m D (17
3. The undersigned Issuer hereby undertakes to offerees.	o furnish to the state administrators, upon written request, information furnished by the is	ssuer to
	ssuer is familiar with the conditions that must be satisfied to be entitled to the Uniform which this notice is filed and understands that the issuer claiming the availability of this excitions have been satisfied.	
The issuer has read this notification and knows th duly authorized person.	ne contents to be true and has duly caused this notice to be signed on its behalf by the unde	ersigned
Issuer (Print or Type)	Signature Date	
GEDR Holding Corp.	1 /abril 6/4g 5/24/02	
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Robert M. Pflieger	Vice President U	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

non-acc investors (Part B-	redited in State	Type of security and aggregate offering					Disqualifica State ULC attach each of waiver (Part E-	ition under		
v		Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)			Type of investor and amount purchased in State (Part C-Item 2)					
Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
	•									
			,							
						· · · · · · · · · · · · · · · · · · ·				
	1									
* ***										

APPENDIX

1	Intend	2 to sell to	3 Type of security and		5 Disqualification under State ULOE (if yes, attach each explanation				
	investor	credited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	•	Type of amount pu (Par	of waiver granted) (Part E-Item 1)			
				Number of Accredited		Number of Non-Accredited			
State MO	Yes	No		Investors	Amount	Investors	Amount	Yes	No
MO					· · · · · · · · · · · · · · · · · · ·				
MT									
NE									
NV									
NH									
NJ		X	Series A Preferred	2	\$125,000	0	0		
NM									
NY		Х	Series A Preferred	2.	\$125,000	0	0		
NC									
ND							\		
ОН									
ОК									
OR				."					
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									
WY									

APPENDIX

1	non-accredited investors in State (Part B-Item 1) aggregate offerin price offered in state (Part C-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type o amount pi (Par	5 Disqualification under State ULOE (if yes, attach each explanation of waiver granted) (Part E-Item 1)			
State PR	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No